FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION	
i Ortivi i	(See instructions)	Office use only
NAME OF COMMITTEE (in	full) (Check if name Example: If typying, type over the lines	12FE4M5
HEART PAC		
ADDRESS (number and	street) 2250 N ROCK RD #118-224	
(Check if address is changed)	;	
	WICHITA	KS 67226 - 111
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	rnoland11@cox.net	
COMMITTEE'S WER	PAGE ADDRESS (URL)	
(Check if address is changed)	· .	
2. DATE 0.1		
3. FEC IDENTIFICA	TION NUMBER C C00342386	
4. IS THIS STATEM	MENT NEW (N) OR X AMENDED (A)	
I certify that I have exami	ined this Statement and to the best of my knowledge and belief it is true, correct a	and complete
	Treasurer Mark Heitz	
Type or Print Name of	Treasurer Walk Helt2	
Signature of Treasurer	Electronically Filed by Mark Heitz	Date 0 4 / 0 1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information may subject the person signing this Sta	
	ANY CHANGE IN INFORMATION SHOULD BE REPORTED	WITHIN 10 DAYS
Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530	ssion FEC FORM 1